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APPLICATION NO.	FILING DATE		FIRST NAMED INVEN	TOR		ATTO	ENEY DOCKET NO.	CONFIRMATION NO.	
10/826,205	04/15/2004		Sun Hee Yang			5895P055		1162	
TITLE OF INVENTION	: SERVER LOAD BAL	ANCING APPARATUS	AND METHOD USI	NG M	IPLS SESSION				
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE I	OUE	PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	YES	\$755	\$300		\$0		\$1055	12/29/2009	
EXAMINER		ART UNIT	CLASS-SUBCLAS	S					
DAFTUAR. SAKET K		2451	709-223000						
1. Change of corresponde CFR 1.363). Change of corresp Address form PTO/Si "Fee Address" ind PTO/SB/47; Rev 03-6 Number is required.	(1) the names of or agents OR, alte (2) the name of a registered attorner 2 registered paten	or printing on the patent front page, list the names of up to 3 registered patent attorneys gents OR, alternatively, the name of a single firm (having as a member a stered attorney or agent) and the names of up to gistered patent attorneys or agents. If no name is d, no name will be printed. 1 Blakely, Sokoloff, 2 Taylor & Zafman LLP							
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified not set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY Electronics and Telecommunications Research Institute Please check the appropriate assignee category or categories (will not be printed on the patent):						RY)	_		
Please check the appropr	iate assignee category of	r categories (will not be p	eriated on the patent):		Individual (a) Co	rporau	on or other private gro	up entity Government	
4a. The following fee(s) Issue Fee Publication Fee () Advance Order	 b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 02-2666 (enclose an extra copy of this form). 								
5. Change in Entity Sta	tus (from status indicate is SMALL ENTITY stat		☐ b. Applicant is n	e lons	ger claiming SMAI	LLEN	TITY status. See 37 CF	FR 1.27(g)(2).	
NOTE: The Issue Fee an	d Publication Fee (if rec		ed from anyone other t					e assignee or other party in	
Authorized Signature	EA CA	Ha-	The state of the s		DateN	oveml	per 25, 2009		
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an application. Confident submitting the complete this form and/or suggest Box 1450, Alexandria, V Alexandria, Virginia 22:	tiality is governed by 33 d application form to the ions for reducing this but inginia 22313-1450. Dis 1450.	5 U.S.C. 122 and 37 CFR c USPTO. Time will var urden, should be sent to the	t 1.14. This collection y depending upon the he Chief Information (COMPLETED FORM	is est indiv Mice IS TO	imated to take 12 i idual case. Any co r. U.S. Palent and D THIS ADDRESS	mmutes mment Traden S. SENI	to complete, including son the amount of tin lark Office, U.S. Department of the TO: Commissioner for the commissi	by the USPTO to process) g gathering, preparing, and ne you require to complete triment of Commerce, P.O. for Patents, P.O. Box 1450, number.	

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